



ST PAUL'S CHURCH RED LION

SUMMER PRESCHOOL REGISTRATION

Summer Preschool Play N Learn
 Registration for Session 6: \$75.00
 August 5-9 from 9-Noon

This is for students who will be entering K in the fall
 and this session will focus on getting ready for
 Kindergarten. Students should pack lunch each day.

| CHILD'S FULL NAME | | | | | |
|--------------------------------|--------------------------|----------------------|--------------------------|----------------------|--|
| | | LAST | <input type="text"/> | FIRST | <input type="text"/> |
| Boy | <input type="checkbox"/> | Girl | <input type="checkbox"/> | BIRTH | <input type="text"/> / <input type="text"/> / <input type="text"/> |
| | | | | AGE: | <input type="text"/> |
| CHILD'S ADDRESS | | | | PHONE: | <input type="text"/> |
| <input type="text"/> | | <input type="text"/> | | ZIP CODE: | <input type="text"/> |
| EMAIL ADDRESS | | <input type="text"/> | | <input type="text"/> | |
| MOTHERS NAME | | <input type="text"/> | | PHONE: | <input type="text"/> |
| MOTHER'S ADDRESS | | <input type="text"/> | | <input type="text"/> | |
| FATHER'S NAME | | <input type="text"/> | | PHONE: | <input type="text"/> |
| FATHER'S ADDRESS | | <input type="text"/> | | <input type="text"/> | |
| WITH WHOM DOES THE CHILD LIVE? | | MOTHER | <input type="checkbox"/> | BOTH | <input type="checkbox"/> |
| | | FATHER | <input type="checkbox"/> | OTHER | <input type="text"/> |

For the child's protection and safety, please inform the church immediately if this information changes or if there are any special circumstances.

| WHO WILL TYPICALLY PICK UP YOUR CHILD? | NAME | RELATION | PHONE |
|--|----------------------|----------|-------|
| | <input type="text"/> | | |

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IN CASE OF AN EMERGENCY

WHICH HOSPITAL DO YOU PREFER?

CHILD'S DOCTOR NAME:

PHONE:

EMERGENCY CONTACT NAME:

PHONE:

EMERGENCY CONTACT NAME:

PHONE:

IN WHICH SCHOOL DISTRICT DO YOU LIVE?

ARE YOU INTERESTED IN LEARNING MORE ABOUT ST. PAUL'S?

ARE YOU CURRENTLY LOOKING FOR A CHURCH TO ATTEND?

HOW DID YOU HEAR ABOUT OUR PRESCHOOL PROGRAM?

DOES YOUR CHILD REGULARLY TAKE ANY SPECIAL MEDICATIONS, HAVE ANY SPECIFIC MEDICAL CONDITIONS, ALLERGIES, ETC.? (If so, please list and explain below. Attach special information or instructions if necessary).

*****PARENTS , please note: All students must be potty trained!

PLEASE RETURN THIS COMPLETED FORM ALONG WITH THE SUMMER PRESCHOOL FEE AS SOON AS POSSIBLE TO SECURE A SPOT FOR YOUR CHILD. Registrations may be dropped off in the church office or may be mailed to the following address: St. Paul's Church Red Lion, PO Box 250 Red Lion Pa. 17356-0250

Class sizes are limited! Your child's spot will be reserved when we receive your completed registration form and Summer Preschool payment. A confirmation email will be sent when registration and payment are processed. Please note: A minimum number of students are required to offer each session. If a session is cancelled, you will be notified by email.